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HOW BEST TO PREPARE STUDENTS FOR LEADERSHIP¹

By MARY M. PICKERING, R.N.

It is with great diffidence that I approach the discussion of a problem of such vital importance to the training school, particularly in the presence of so many who could speak with the authority of experience and the inspiration of success. I treat the subject solely as one striving toward an ideal rather than as one having attempted to master the problem.

In order to be a constructive leader the individual must be technically expert in her field, broadly and liberally educated; she should possess a personality that will win people; she must have a religion or philosophy of life; above all she must be of steadfast character, unselfishly devoted to high ideals of world service.

It does not seem possible in three years' time with our present methods to give the majority of the students we now have in our nursing schools the background necessary for leadership in the affairs of their community and the world. Their immaturity unfits them for arduous duty and great responsibility; their lack of judgment makes it impossible for them to discriminate between essentials and non-essentials; their inadequate preliminary education makes it extremely difficult for them to do satisfactory work in the classroom. Until we change our methods of nursing education we shall continue to turn out a finished product that will lower our professional standards.

By a preliminary nursing course in a Central School or College of Nursing two results would be accomplished for the student: she would have an adequate course of theoretical instruction, a real ground work of science and the arts in preparation for her technical training; and, by the length of her preliminary course, she would be just so much more mature, with so much better judgment and physical and mental stability to begin her practical work in nursing, to assume the responsibility of caring for the physical and mental abnormalities of patients in the hospital. It is of course only a matter of time until these Central Schools of Nursing will be ready to function. When that time comes our present problems will be greatly diminished. Until it comes, however, we must accept conditions as they are and do our best to develop adolescent girls into worth-while women, and at the same time, train them to become

¹ Read at the meeting of the National League of Nursing Education held in Kansas City, Missouri, April 11-14, 1921.

nurses of high technical skill with the ability to lead their fellow women.

It is scarcely necessary to note that we would be able to attract a higher type of womanhood into our schools by means of better living conditions, religious organization, recreation, elimination of excessive housework, the establishment of self-government, etc. All of these things are being planned for and established in many schools. All that is accomplished in this direction will definitely contribute to the development of the qualities of womanhood and leadership. Our purpose, however, is to discuss the more practical side of the training of the pupil nurse on the hospital wards.

I believe the crux of the problem lies in teaching the students responsibility,—their responsibility to themselves, to their school, and to their patients. If we require of them the best work they are capable of doing and at the same time teach them to think for themselves and to direct themselves, our object will be accomplished. We have seen by experience that we cannot give them a course of instruction in nursing methods, or a resumé of the etiology, treatment, and prognosis of a disease and expect them to apply these principles and facts to their daily work on the wards. It is only by constant coördination of theory with practice; a close system of follow-up twenty-four hours a day,—“here a little and there a little, line upon line and precept upon precept,”—a constant reiteration of the principles of good nursing technique and of our attitude to our work and to our patients; that we can give them the mental discipline required in the making of a good nurse. And they must first be good nurses before they can become leaders. This follow-up must be stimulating and constructive with one object in view,—to cultivate the habit of doing consistently good work and to develop the self-directing state of mind.

It is obvious that one person from the educational department or from the training school office is able to give only general supervision to the ward work of all the students in the school. Constant detailed supervision can be given only by the ward supervisor or head nurse herself. If she carries out her obligation to the nursing profession she must be a woman of first-rate ability and character, who by her own example and personality will stimulate the students to be constantly on the *qui vive* for more knowledge and greater skill and to give the best that is in them to their patients.

The supervisor must be a teacher and a practical psychologist. No number of classroom lectures will make a nurse. One learns by doing as well as by study. She must be familiar with classroom methods and see that they are carried out repeatedly until the student follows her technique without conscious thought. She must be

able to determine how much responsibility students are able to bear and to maintain for them the proper balance. By grading their responsibility and giving them constantly increasing amounts, as they can carry it, she aids them to develop themselves to the limit of their powers.

In her "Psychology of Nursing" Aileen Cleveland Higgins says, in part, "The difference in the professional ability of nurses lies primarily in the amount of power allowed to remain dormant. * * * Let it be borne in mind that what the young nurse needs most * * * is awareness of her mind as a working force, together with recognition of her undeveloped power and her wrong habits of behavior. * * * Let the nurse comprehend something of the power within her; let her realize the millions and millions of her brain cells not in use, the faults and weaknesses that are holding her back. The world needs her dormant power. Never in the history of nursing has there been such a demand for highly trained women."

If supervisors could be induced to accept the responsibility and opportunity of this intensive training of the student, results would soon be apparent in richness of experience to themselves and in the higher type of nurse which we would graduate from our schools.

As the student should look to the supervisor for her nursing and technical guidance, so should the supervisor in turn be able to seek and gain from the superintendent of nurses and her staff, advice, support, and inspiration. She should be familiar with the general plan of the nursing course both in theory and practice so that she could give intelligent coöperation to the instructor. She should be conferred with and advised by the superintendent of nurses so that she might consciously carry the policies and ideals of the school into her work with the students on the ward. She should know that she will be loyally supported by the staff in her training of the individual pupil. She should realize that her work is of great importance and her influence in the nursing world may be unlimited.

More depends on the selection of the personnel of the training school staff than on any other one factor in the developing and training of students. They should be women who involuntarily command the respect of their fellow workers, whose chief interest is in their work, whose one aim is to uphold the ideals of their profession and to turn out from their school only the highest type of nurse. They must be practical idealists, able to keep in mind and inspire in others the feeling that our work is largely influenced by our attitude of mind; that the little incidents of the day contribute to the sum total of our aims; that we must constantly live the best

that is in us; that only by a combination of ability and character can we hope to be true leaders of our profession.

The problem seems to resolve itself into this,—that every person concerned with the training of the student must work toward one goal,—to establish the habit of doing good work, of self direction and government, and above all to teach the student to realize her responsibility to her patients and to the profession. We must teach her the keynote of successful leadership in nursing as given by Miss Nutting in an address to the group of college women who had their pre-nursing work at Vassar,—“Our actual characters, our genuine strength and worth * * * reveal themselves in the steadfastness with which we hold to a high purpose through the dull routine of daily duty, over long periods; in the fortitude and faith with which that purpose is pursued in the face of discouragement and sometimes defeat; in the dauntless spirit which holds that

‘Tasks in hours of insight willed

Can be through hours of gloom fulfilled.’

It is largely this spirit, this refusal to look upon the daily duty, made up of the necessary tasks of life,—as a kind of slavery; this sense of responsibility for standing by our work as a captain stands by his ship, which forms the bone and marrow of nursing.”

SUGGESTION: A POWER IN THE HANDS OF THE NURSE

BY MARY GOODYEAR EARLE, R.N.

New York City.

“Nobody can dimly picture my sufferings,” Miss Ball petulantly insisted, and indeed one could see at a glance that she did suffer and that she was a sick woman. “The doctors all tell me that they can’t find anything the matter with me, but they simply don’t understand my case, or else they don’t tell me the truth!” With Miss Ball, “My Case” was a constant topic of conversation. She would talk for hours, dilating upon her various symptoms; the feeble state of her digestion; the exquisite pain caused by the pressure of the seams of her stockings,—she had such tender feet. A kindly, influential friend at the rest home, where Miss Ball was staying, became interested in her and began to wonder whether she had had expert medical advice. Knowing some famous specialists, she advised putting Miss Ball under their care. X-ray pictures were taken of the patient’s stomach, and the negative seemed to show the presence of an ulcer. An